

STATE TROOPER RESERVE APPLICATION



Return to:
Alabama Department of Public Safety
Attn: Reserve Program Coordinator
301 South Ripley
Montgomery, Alabama 36104

PERSONAL INFORMATION

Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip Code)

Telephone Number: Home: _____ Cell: _____ Work: _____
(Area Code) (Area Code) (Area Code)

Date of Birth: _____ Social Security: _____ Race: _____ Sex: ☐ Male ☐ Female

Alabama Driver License Number: _____ Expiration Date: _____

Are you a citizen of the United States? ☐ Yes ☐ No

EDUCATIONAL

High School diploma or GED? ☐ Yes ☐ No

Circle or bracket the highest grade completed.
1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4

List any courses that are related to the position of State Trooper Reserve.

Name and Location of School

From

To

Hours

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LAW ENFORCEMENT EXPERIENCE

List any Law Enforcement related schools attended.

Name and Location of School

From

To

Hours

_____	_____	_____	_____
_____	_____	_____	_____

Are you currently APOST Certified? ☐ Yes ☐ No Have you previously been APOST Certified? ☐ Yes ☐ No

If previously APOST Certified, how long has your certification been expired? _____

BACKGROUND

Have you ever been convicted of a felony? ☐ Yes ☐ No

Have you ever been arrested for any criminal offense other than traffic? ☐ Yes ☐ No If yes, explain below.

Have you ever been arrested for any traffic offense? ☐ Yes ☐ No If yes, explain below.

EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)

1. Name of Employer _____

Address _____
(Street) (City) (State) (Zip Code)

Supervisor and Title _____ Your Title _____

Employed From _____ To _____

Work Performed

Reason for leaving _____

2. Name of Employer _____

Address _____
(Street) (City) (State) (Zip Code)

Supervisor and Title _____ Your Title _____

Employed From _____ To _____

Work Performed

Reason for leaving _____

3. Name of Employer _____

Address _____
(Street) (City) (State) (Zip Code)

Supervisor and Title _____ Your Title _____

Employed From _____ To _____

Work Performed

Reason for leaving _____

REFERENCES

Name	Relationship	Home Phone	Daytime Phone

CERTIFICATION STATEMENT

I certify that all statements on or attached to this application are true and correct to the best of my knowledge. I know that any false statements may cause me to be denied the opportunity to participate in the state trooper reserve program. I further authorize the release of all relevant prior employment, military service, academic/school and any criminal records concerning my past history. If employed as a reserve, I understand that there is no monetary or other type compensation for any regular or overtime hours worked.

Applicant's Signature _____ Date _____